

10/100415

10/700912

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

KJm+

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 12            | 12                       |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 12 minus 20 = | 8                        |
| INDEPENDENT CLAIMS               | 1 minus 3 =   | 8                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| X\$ 9=    | —      | OR X\$18=    |        |
| X43=      | —      | OR X86=      |        |
| +145=     | —      | OR +290=     |        |
| TOTAL     | 385    | OR TOTAL     |        |

• If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---------------------------------|---|------------------|
|  | REMAINING<br>AFTER<br>AMENDMENT |   |                  |
| Total  | 9                               | Minus                                       | 20               |
| Independent                                    | 6                               | Minus                                       | 3                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |   |                  |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| X\$ 9=          | —                      | OR X\$18=          |                        |
| X43=            | 200                    | OR X86=            |                        |
| +145=           | —                      | OR +290=           |                        |
| TOTAL ADDT. FEE | 200                    | OR TOTAL ADDT. FEE | 290                    |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---------------------------------|---|------------------|
|  | REMAINING<br>AFTER<br>AMENDMENT |   |                  |
| Total  | 13                              | Minus                                       | 20               |
| Independent                                    | 5                               | Minus                                       | 40               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |   |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| X\$ 9=          |                        | OR X\$18=          |                        |
| X43=            |                        | OR X86=            |                        |
| +145=           |                        | OR +290=           |                        |
| TOTAL ADDT. FEE |                        | OR TOTAL ADDT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS                          | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---------------------------------|---|------------------|
|  | REMAINING<br>AFTER<br>AMENDMENT |   |                  |
| Total  | 12                              | Minus                                       | 20               |
| Independent                                    | 6                               | Minus                                       | 40               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |   |                  |

| RATE            | ADDI-<br>TIONAL<br>FEE | RATE               | ADDI-<br>TIONAL<br>FEE |
|-----------------|------------------------|--------------------|------------------------|
| X\$ 9=          |                        | OR X\$18=          |                        |
| X43=            |                        | OR X86=            |                        |
| +145=           |                        | OR +290=           |                        |
| TOTAL ADDT. FEE |                        | OR TOTAL ADDT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.